



# SPECIAL 510(K) SUMMARY

#### 1. GENERAL INFORMATION

Trade Name	PASS LP Spinal System
Common Name	<ul> <li>✓ Posterior pedicle screw system</li> <li>✓ Hooks</li> <li>✓ Sacral plate</li> </ul>
Classification Name	<ul> <li>✓ orthosis, spinal pedicle fixation per MNI 888.3070</li> <li>✓ orthosis, spondylolisthesis spinal fixation per MNH 888.3070</li> </ul>
Class	Class II
Product Code	MNI / MNH
CFR section	888.3070
Device panel	Orthopedic
Legally marketed predicate devices	The PASS LP Spinal System is substantially equivalent to similar previously cleared lumbar intervertebral body fusion devices.
Reason for Special 510(k)	Product range extension and additional components
Submitter	MEDICREA <sup>®</sup> Technologies Z.I. Chef de Baie 17000 La Rochelle, France
Contact	J.D. Webb 1001 Oakwood Blvd Round Rock, TX 78681 512-388-0199 E-Mail: ortho.medix@sbcglobal.net

## 2. PREDICATE DEVICE DESCRIPTION

The Medicrea PASS LP Spinal System consists of pedicle screws, hooks, sacral plates, clamps, rods, nuts, rod plates and crosslink members. It can be used for single or multiple level fixations. All components are manufactured from titanium alloy (Ti-6AI-4V ELI) that conforms to ASTM F136.

# 3. DESCRIPTION OF DEVICE MODIFICATION

The purpose of this submission is to make modifications to the PASS LP Spinal System.

# 4. INTENDED USE

The PASS LP Spinal System includes a pedicle system intended to provide immobilization and stabilization of spinal segments in skeletally mature patients as an adjunct to fusion in the treatment of the following acute and chronic instabilities or deformities of thoracic, lumbar, and sacral spine:

- Fractures
- Dislocation
- Failed previous fusion (Pseudoarthrosis)
- Degenerative spondylolisthesis with objective evidence of neurological impairment
- Spinal deformations such as scoliosis or kyphosis.
- Loss of stability due to tumors.

page 1 of 2

K082577



The PASS LP Spinal System is also indicated for pedicle screw fixation for the treatment of severe spondylolisthesis (Grades 3 and 4) of the L5–S1 vertebra in skeletally mature patients receiving fusion by autogenous bone graft having implants attached to the lumbar and sacral spine (L3 to sacrum) with removal of the implants after the attainment of a solid fusion.

#### 5. PERFORMANCE DATA

When applicable, the tests performed on the additional components according to ASTM F1798, indicate that the products are as mechanically sound as other devices commercially available.

page 2 of



Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

OCT 03 2008

Medicrea Technologies C/o Mr. J.D. Webb Official Correspondent 1001 Oakwood Boulevard Round Rock, Texas 78681

Re: K082577

Trade/Device Name: PASS LP Spinal System

Regulation Number: 880,3070

Regulation Name: Pedicle Screw Spinal System

Regulatory Class: II

Product Code: MNH, MNI Dated: August 28, 2008

Received: September 5, 2008

## Dear Mr. Webb:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Center for Devices and Radiological Health's (CDRH's) Office of Compliance at (240) 276-0120. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR Part 807.97). For questions regarding postmarket surveillance, please contact CDRH's Office of Surveillance and Biometric's (OSB's) Division of Postmarket Surveillance at (240) 276-3474. For questions regarding the reporting of device adverse events (Medical Device Reporting (MDR)), please contact the Division of Surveillance Systems at (240) 276-3464. You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (240) 276-3150 or at its Internet address <a href="http://www.fda.gov/cdrh/industry/support/index.html">http://www.fda.gov/cdrh/industry/support/index.html</a>.

Sincerely yours,

Mark Il Miller

Mark N. Melkerson

Director

Division of General, Restorative and Neurological Devices Office of Device Evaluation Center for Devices and Radiological Health



#### INDICATIONS FOR USE

510(k) Number (if known):	
Device Name: PASS LP Spinal System	
PASS LP Spinal System	
<u>Indications for Use</u>	

The PASS LP Spinal System includes a pedicle system intended to provide immobilization and stabilization of spinal segments in skeletally mature patients as an adjunct to fusion in the treatment of the following acute and chronic instabilities or deformities of thoracic, lumbar, and sacral spine: degenerative spondylolisthesis with objective evidence of neurological impairment, fracture, dislocation, spinal deformations such as scoliosis or kyphosis, loss of stability due to tumors, and failed previous fusion (pseudoarthrosis).

The PASS LP Spinal System is also indicated for pedicle screw fixation for the treatment of severe spondylolisthesis (Grades 3 and 4) of the L5–S1 vertebra in skeletally mature patients receiving fusion by autogenous bone graft having implants attached to the lumbar and sacral spine (L3 to sacrum) with removal of the implants after the attainment of a solid fusion.

Prescription Use 
✓ AND/OR Over-The-Counter Use \_\_\_\_\_
(Part 21 CFR 801 Subpart D) (21 CFR 801 Subpart C)

(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE OF NEEDED)

Concurrence of CDRH, Office of Device Evaluation (ODE)

(Division Sign-Oti)
Division of General, Restorative
and Neurological Devices

510(k) Number 16082577